

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			

**BEST AVAILABLE** **WHOLE COPY**

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/31/64
2	✓	✓	3/26/64
3	✓	✓	2/26/64
4	✓	✓	4/26/64
5	✓	✓	4/26/64
6	✓	✓	4/26/64
7	✓	✓	4/26/64
8	N	N	
9	N	N	
10	N	N	
11	N	N	
12	N	N	
13	N	N	
14	N	N	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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